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(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 13 Attorney Docket Number 13DV-14035/11702 (21635-0044)

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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Acknowledgment Postcard, Certificate of Mailing
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	McNees Wallace & Nurick LLC Kurt L. Ehresman
Signature	
Date	August 11, 2003

CERTIFICATE OF MAILING

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Signature		Date	August 11, 2003

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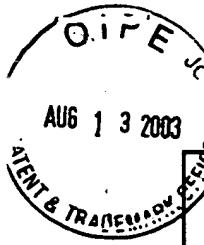
O I P E EE TRANSMITTAL AUG 13 2003 for FY 2003		Complete if Known	
		Application Number	09/931,347
		Filing Date	08/16/2001
		First Named Inventor	NAGARAJ et al.
		Examiner Name	J. McNeil
		Group / Art Unit	1775
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	
TOTAL AMOUNT OF PAYMENT (\$)		84	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account:		3. ADDITIONAL FEES																																																			
Deposit Account Number	50-1059	Large Entity	Small Entity																																																		
Deposit Account Name	McNees Wallace & Nurick LLC	Fee Code	Fee (\$)	Fee Description	Fee Paid																																																
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																					
FEE CALCULATION																																																					
1. BASIC FILING FEE <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="3">Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>520</td> <td>2003</td> <td>260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3">SUBTOTAL (1)</td> <td colspan="3">(\$0)</td> </tr> </tbody> </table>						Large Entity	Small Entity	Fee Description			Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)			1001	750	2001	375	Utility filing fee		1002	330	2002	165	Design filing fee		1003	520	2003	260	Plant filing fee		1004	750	2004	375	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)			(\$0)		
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2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th></th> <th></th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> <th></th> </tr> <tr> <th>Total Claims</th> <td>15</td> <td>-20 **</td> <td>= 0</td> <td>X 18</td> <td>= 0</td> </tr> <tr> <th>Independent Claims</th> <td>4</td> <td>-3 **</td> <td>= 1</td> <td>X 84</td> <td>= 84</td> </tr> <tr> <th>Multiple Dependent</th> <td></td> <td></td> <td></td> <td>X 0</td> <td>= 0</td> </tr> </thead> <tbody> <tr> <td colspan="3">SUBTOTAL (2)</td> <td colspan="3">(\$84)</td> </tr> </tbody> </table>								Extra Claims	Fee from below	Fee Paid		Total Claims	15	-20 **	= 0	X 18	= 0	Independent Claims	4	-3 **	= 1	X 84	= 84	Multiple Dependent				X 0	= 0	SUBTOTAL (2)			(\$84)																				
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*or number previously paid, if greater; For Reissues, see above																																																					
Complete if applicable																																																					
SUBMITTED BY																																																					
Name (Print/Type)	Kurt L. Ehresman	Registration No. Attorney/Agent)	33,453	Telephone	717-237-5458																																																
Signature	<i>[Signature]</i>			Date	August 11, 2003																																																

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